



# Outcomes Of Implementation Of Evidence-Based Practices For Pressure Injury Prevention In PICU - A Journey To Zero Harm

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**Introduction:** Pressure injuries remain a significant concern in Pediatric Intensive Care Units (PICUs), impacting patient outcomes and healthcare costs. This presentation showcases evidence-based practices implemented in our PICU to prevent pressure injuries, embracing a "Journey to Zero Harm."

## Methods and outcome assessment:

We implemented **Evidence-Based Practices** \* in children with high risk factors (immobility, mechanical ventilation, and other co-morbidities ) analyzed the outcomes such as pressure ulcer incidence , scoring, length of PICU stay, and mortality. We compared these parameters with historical controls. We used pressure ulcer staging using National Pressure Ulcer Advisory Board (NPUAB) staging to analyze pressure injuries

\*Evidence-Based Practices:

1. Risk assessment and early identification using Braden Q scale. Normal >23, high risk score <23
2. Standardized skin care protocols (bathing, moisturizing).
3. Advanced support surface utilization (alpha excel mattresses, small soft back rolls, Gel Ring and Mepilex Border ).
4. Regular repositioning and mobilization strategies using position clock.
5. Education and training for healthcare staff.
6. Interdisciplinary collaboration and education.

## Results.

The incidence of high risk for pressure ulcer was observed in 9 (1.09 % ) children in the historical cohort in the year 2023 as against 3 (0.6 %) cases in the year 2024. After implementing best practice evidence, we found the injury staging decreased to a mean of 1(SD:

0) compared to historical cohort 1.40 (SD 0.49). LOS decreased to a mean of 17 days (SD 9.8) compared to 28 days (SD: 17) There was no mortality difference between the groups

**\*Conclusion:\***

Our comprehensive approach reduced the incidence rates and severity of pressure injury. Standardizing assessment, prevention and management is crucial. Ongoing interventions including in-service education, external training, and regular audits are required for optimal outcomes.

**\*Keywords:\*** Pressure injury prevention, PICU, evidence-based practices, skin care, quality improvement.